AN

ADDRESS

TO

THE MEMBERS

OF THE

ROYAL COLLEGE OF SURGEONS,

On the REGULATION *of the* SURGICAL DEPARTMENT
of the ROYAL INFIRMARY.

By ANDREW WARDROP.

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AN

ADDRESS

TO

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OF THE

ROYAL COLLEGE OF SURGEONS.

THE Memorial which has recently been preſented by Dr Gregory to the Managers of the Royal Infirmary, on the manner in which the attendance of the Surgeons, is, and ought to be regulated; has not only brought the ſubject, anew, under the conſideration of thoſe immediately concerned, but has alſo warmly intereſted the Public mind.

The Managers, convinced as they are, that ſome change ought to be adopted, but determined to proceed with that caution which the importance of the caſe requires, have deſired to be informed of the opinion of the College of Surgeons, in their collective capacity, before they ſhall decide in favour of any ſpecific change. The College, in order to be enabled properly to fulfil the deſire of the

Managers, has invited each of its Members to tranſmit to the Preſident his ſentiments in writing. As, at our public meetings, we have not leiſure to engage in long diſcuſſions, this ſeems to be the beſt method that can be deviſed for obtaining the genuine ſenſe of the whole College, on a ſubject of the moſt ſerious importance; and it becomes the duty of every Member who has maturely conſidered it, to communicate his ſentiments, in this channel, to the reſt of his Brethren.

It is for this reaſon I ſubmit to their conſideration the preſent Addreſs; aſſuring them, that I am more ſolicitous to develope the principles which ought to guide the College in returning an anſwer to the Managers, than to have my own plan preferred.

My opinion on this ſubject has been long decided. I have indeed uniformly deemed the preſent arrangements of the Surgical Department of the Infirmary as very faulty, much worſe indeed than thoſe which exiſted during the firſt years of my attendance as a ſurgeon of the Hoſpital. The four ſurgeons, who, under the name of *Subſtitutes*, then acted as aſſiſtants to the monthly attendants, and who, occaſionally, had the ſole charge of the houſe, formed a body of men, whoſe duty it was to ſee the regulations inforced, and who were accuſtomed to deliberate and act in concert. I remember a particular period at which this office was filled by individuals, who, matured by experience, though ſtill in the vigour of life, attended the Hoſpital with aſſiduity, neglected no part of its buſineſs, and added many improvements to the art of ſurgery. Theſe advantages are to be aſcribed, in part, to that ſpirit of emulation, which naturally ariſes among men of ability engaged in the ſame purſuit. The ſucceſſion of Subſtitutes, however, *by Rotation*, as well as of the monthly attendants, rendered the ſyſtem defective; and would have rendered it more and more defective, had it continued to the preſent time,

time, in proportion to the increaſing number of the Members of the College of Surgeons. But I muſt confeſs, that the plan which was ſubſtituted, and which is at preſent acted upon, appeared to me, from the beginning, and ſtill appears, far more objectionable than that which it ſupplanted: Becauſe, by the preſent regulations, the buſineſs of the Surgical Department fluctuates inceſſantly from one to another, and the benefits ariſing from friendly diſcuſſion, and from due experience, are excluded; or, to ſum up all, becauſe, neither are adequate motives nor opportunities for uſeful exertion provided. So that the new arrangement retained much that was faulty, and excluded every thing that was beneficial, in the old. At that time I thought of another plan, which, I ſuppoſed, might remove the defects of the old arrangement, and prevent others which were apprehended from the new; and which, in particular, might tend to keep alive amongſt the Surgeons a ſpirit of emulation, uſeful to the charity, and advantageous to the profeſſion.

The renewed diſcuſſion of this ſubject, occaſioned by Dr Gregory's Memorial, induced me immediately to ſubmit my opinion, confirmed by experience, to the conſideration of ſome of thoſe who are intereſted in the point at iſſue. Several incidental circumſtances have, hitherto, prevented me from laying it before all the Members of the College of Surgeons. I hope that it is not yet too late. This delay, by enabling me to aſcertain, in ſome degree, the opinions of others, qualifies me to make a few obſervations on them: After which, I ſhall ſtate my plan without alteration, as I think it better to preſent it in its original form, than incumbered with thoſe minute modifications, which the ideas of others have ſuggeſted.

As it is fully as material to aſcertain the points on which men *agree*, as thoſe on which they *differ*, I begin by remarking, that the whole

whole of the Members of the College of Surgeons ſeem to be unanimous on two material articles. *Firſt*, That the removal of the ſufferings of the unfortunate claſs of patients to whom the Infirmary offers an aſylum, is the leading object of the inſtitution, and ought upon no account to be ſacrificed to any other conſideration. *Secondly*, That the means of inſtruction which this inſtitution affords to medical ſtudents, and of practical improvement to profeſſional men, is the object next in importance. To attain the firſt of theſe objects then, at all events, and to ſecure the ſecond, as ſubſervient to it, ought to be the ſteady aim of every one of us. If we adhere cloſely to theſe general principles, it is not likely that we ſhall differ widely in their application.

With reſpect to the *Detail*, too, it ſeems to be admitted by every individual, that there are faults attending the preſent regulation of the Surgical Department, which may and ought to be corrected. This is an important coincidence of opinion, which ſhould not for a moment be forgotten. I ſhall now proceed to the points on which there exiſts a diverſity of ſentiment.

There are three opinions which have their reſpective ſupporters among the Members of our College.

I. The firſt is that of thoſe, who, admitting in common with all their Brethren, the exiſtence of material defects in the preſent ſyſtem, maintain, nevertheleſs, that theſe may be leſſened, or removed, without giving up the plan of attendance by Rotation; who conſider the right of attendance by rotation to belong to them; and who inſiſt upon defending this ſuppoſed right at all hazards.

This opinion is, I believe, ſupported by a majority of the Members of the College of Surgeons. Its adherents propoſe, indeed, ſome modifications,

modifications, and particularly an extenſion of the term of attendance by rotation, but none of them propoſe to extend it beyond the term of one year.

The evils *neceſſarily* reſulting from a ſyſtem of attendance by rotation, have been ſo amply and variouſly exhibited by Dr Gregory, and others, that I could only repeat their arguments, by renewing the diſcuſſion. The reaſonings of theſe gentlemen has forcibly impreſſed the minds of the Managers; and they appear to a conſiderable number of our own body, of whom, I am one, ſo convincing, that I think I may aſſume, as a principle, that the ſyſtem of rotation, under any modification, can never fulfil the purpoſes of the inſtitution: and till their arguments are confuted, the humanity and regard for conſiſtency of thoſe who profeſs the opinion oppoſite to this, ſhould alike induce them to abandon it. Nay, if they conſult their own intereſt only, they will agree to this meaſure; for, while rotation is carried through ſuch a numerous body, on the preſent plan, there is no time for improvement; and ſhould it be extended to the longeſt period propoſed, it would ſtill be very inadequate for this purpoſe. For each individual could have ſo limited a charge of the Hoſpital, during the whole courſe of his life, that he could neither gain experience, nor acquire reputation, by his greateſt exertions. Beſides, it has been well remarked, that the Managers have it in their power to counteract the deſigns of thoſe who contend for this ſyſtem, by extending the term of each individual's attendance, to ſuch a length, as to confine the charge of the Hoſpital to a very limited number.

If theſe propoſitions cannot be ſet aſide, the adherents of the firſt opinion tacitly admit, that their profeſſions of regard to the Hoſpital, and even to the improvement of ſurgery, are mere words of courſe, which yield to the ſpirit of party, or individual ſelfiſhneſs.

The public are convinced of the neceſſity of a change of ſyſtem, and will not eaſily be made to believe, that the preſent is the beſt. Would the Surgeons plead their right in a court of law, in defiance of the dictates of humanity?

II. The ſecond opinion is, that the College ought to give up into the hands of the Managers, every claim as to the mode of attendance, and to recommend to them the Election of a few ſurgeons for life, or for ſuch a ſeries of years, as to be equal to the uſual duration of profeſſional activity.

Thoſe who hold this opinion, think it but fair, that the Managers ought to return the ſum which they received from the College, ſixty years ago, as purchaſe money for attendance by rotation. They further think, that if the College refuſe to accede to theſe terms, the Managers ſhould have recourſe to a legal proceſs, or an application to the Britiſh Parliament. This opinion ſtands in direct oppoſition to the former, and, I own, by no means coincides with my ideas on the ſubject. The meaſures which it recommends are of ſuch a nature, as to provoke the determined oppoſition of a great majority of the College of Surgeons, and ſhould they have recourſe to a court of law, the expenditure of the funds appropriated for the comfort of the poor, would be regarded by the Public with marked diſapprobation, if, by any reaſonable conceſſion on the part of the Managers, it could be avoided. Or even ſuppoſing, that the Surgeons ſhould not carry their oppoſition ſo far, yet they would be diſpoſed ever afterwards to view the Infirmary with an unfriendly eye; a circumſtance, which would be productive of evils worſe than thoſe which it is the profeſſed object of all of us to remove. This is an important reaſon why a middle plan, ſteering clear of either of the two extremes I have ſtated, ought to be adopted.

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But, independent even of this conſideration, I am decidedly of opinion, that ſuch permanent appointments are, upon the whole, unfavourable to the welfare of the Hoſpital, and of the public good, as it is connected with the improvement of ſurgery.

In this I differ from a friend of whom I think ſo highly, that when we have occaſionally diſagreed on any topic, I have always been more inclined to ſuſpect the fallacy of my own judgment, than of his. He thinks the permanent appointment of ſurgeons would lead to a much higher improvement of the art, than any other mode that can be deviſed. My idea is, that if an arrangement were formed, by which the Managers might, under certain limitations, elect a given number, in the vigour of life, for a conſiderable period, which number ſhould be gradually ſucceeded by others, that the evils of rotation, on the one hand, and thoſe of permanent appointments, on the other, might be alike prevented. This opinion ſeems to be more warranted by our knowledge of human nature, than that to which it is oppoſed. For an honourable deſire to excel each other, and not to appear inferior to their ſucceſſors, will excite in the minds of the ſurgeons thus appointed, a zealous attention to the duties of their office, from which the higheſt advantages may be derived; while the extenſion of the term of appointment, and the propoſed order of election, will inſure a regular and gradual ſupply of competent ſurgeons.

It has been aſſerted, that a very few ſurgeons bred in the Hoſpital, are ſufficient to perform all the buſineſs in this city, which is purely ſurgical. I admit, that a very ſmall number, perhaps one or two, may perform all the capital operations: but even in capital operations, it were not to be wiſhed, that the choice of the public ſhould be confined to ſo ſmall a compaſs, or rather that the public ſhould have no choice at all. Beſides, ſurgery takes in a much

much wider field than ſo ſmall a number could decently manage. So that, were the Managers, by the permanent appointment of ſo limited a number, even of men of talents, to bring them thus into a kind of monopoly of private practice, it ought to be matter of regret, not of ſatisfaction, to the public. But the Managers, with the moſt upright intention, have not the power of divination, and might ſometimes be miſtaken in their choice: or, if they ſhould elect the ableſt men, how could they provide againſt thoſe caſualties incident to human life, by which, on ſuch a plan, we might ſuddenly be left deſtitute of proper ſurgical aid.

I am well aware, however, of the danger to be apprehended in truſting to ſpeculative reaſonings, in adopting any important change. I ſhall therefore willingly ſubmit the queſtion to the teſt of experience; and the facts, which I ſhall for this purpoſe adduce, are of ſuch a nature, that thoſe to whom they are addreſſed, are quite competent to eſtimate their reality and their force.

Firſt, During the time when the ſubſtitute ſurgeons exiſted, and when they happened to have the ſole charge of the Infirmary, its buſineſs was much better conducted than it is at preſent, and many important improvements were made in ſurgery.

Secondly, Among the numerous hoſpitals in England, excepting thoſe of the metropolis, we meet with ſurpriſingly few improvements; ſo few indeed, and inſignificant, that if we except thoſe introduced by one gentleman at Liverpool, they are not worthy of being named.

Thirdly, Although in London a ſpirit of emulation is promoted, by the number of hoſpitals which it contains; yet even theſe are not ſo well attended as the Infirmary is at preſent. Moſt of them

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are viſited once or twice a week only. All intervening caſes are left to the care of a houſe-ſurgeon, and thoſe ſurgeons who have attained eminence, attend only on particular occaſions.

Theſe facts, if admitted, form a moſt ſubſtantial argument in favour of the third opinion as to the mode of attendance; which, as it has been in ſome meaſure anticipated, and will be more fully developed in the ſequel, I ſhall here ſtate conciſely, and without any comment.

III. The ſupporters of this opinion maintain, that the preſent mode of indiſcriminate and rapid *Rotation*, ought henceforth to give place to *Election* by the Managers: That the number of thoſe elected ought to be conſiderable; but that the intereſts of the inſtitution, and of the public, do not require, nay, that they oppoſe permanent appointments: That, therefore, ſuch limitations and rules ſhould be adopted, as to inſure a gradual and regular ſupply to the different offices of the Surgical Department; as alſo to afford a probability to a majority of the College of Surgeons, of their being at one period or another elected: And, *laſtly*, that to ſuperſede every queſtion about the matter of right, and avoid an odious litigation, the repayment of the ſum paid long ago by the Surgeons ought to be diſpenſed with, on the adoption of ſome ſuch plan as this.

In conformity to theſe general principles, I ſhall ſubjoin four ſpecific propoſitions, on which I believe we are alſo agreed, and which I think ſhould form the baſis of the anſwer to be returned by the College to the Managers, and of any new arrangement which the Managers may adopt.

1. That the right to *elect* ſurgeons to the Royal Infirmary, ſhall be veſted ſolely in the Managers.

2. That not leſs than four ſurgeons ſhall be elected to the principal charge of the Infirmary.

3. That one of theſe ſhall be changed at the end of every year, or of every two years at fartheſt.

4. That no ſurgeon ſhall be appointed one of thoſe, to whom the principal charge of the Infirmary is committed, until he ſhall have ſerved four years as an aſſiſtant.

A PLAN *for the Future Regulation of the* SURGICAL DEPARTMENT *of the* ROYAL INFIRMARY.

I PROPOSE that the Surgeons to be appointed be divided into three claſſes. 1*ſt*, CONSULTING SURGEONS—2*d*, ATTENDING SURGEONS—and, 3*d*, ASSISTING SURGEONS.

I. OF THE CONSULTING SURGEONS.

THE Managers may elect for life, or while they continue to do their duty, ſix or eight conſulting ſurgeons: the preciſe number is not material. Their places may afterwards be ſupplied by the attending ſurgeons, who ſhall have finiſhed their duty; for I propoſe, that to the liſt of conſulting ſurgeons, ſhall be added every attending ſurgeon at the termination of his appointment. Such only of theſe gentlemen ſhould attend conſultations, as may be called upon by the ſurgeons in attendance; but they ſhould promiſe to obey their ſummons; and if it appear that they neglect their duty, while they continue fit for it, their names ſhould be ſtruck out of the liſt.

II. OF THE ATTENDING SURGEONS.

I PROPOSE that ſix ſurgeons be elected, who ſhall have the charge of the Surgical Department of the Hoſpital, for the term of ſix

ſix years, according to a method which I am ſoon to ſtate. Two of theſe ſhall attend at one time, and for three months: then two others ſhall ſucceed them for the ſame period; laſtly, the remaining two ſhall take charge of the Hoſpital. Thus each of theſe ſix ſurgeons will have the charge of the houſe for three months out of nine, during the whole period of ſix years. The ſeniority among thoſe firſt elected, ſhall be determined by lot, and ever afterwards by priority of election. At the end of the firſt year, the ſenior attending ſurgeon ſhall go out of office, and the ſenior aſſiſtant ſurgeon be appointed in his place; and thus, at the end of each ſucceeding year, the ſenior attendant ſhall retire, and his place be ſupplied, as above ſpecified, by the ſenior aſſiſtant. I would propoſe, however, an exception, viz. that after the lapſe of three years from the period at which any attendant ſurgeon retires from office, the Managers ſhould reſerve to themſelves the power of re-electing him for one other period, but not oftener; and in this caſe, the ſenior aſſiſtant ſurgeon will of courſe not be appointed. As a vacancy may occur by death or reſignation, in the intervals between the ſtated periods of election, I beg leave to ſuggeſt, as an eaſy expedient for avoiding any inconveniency which may thus ariſe, that the Managers ſhall appoint the ſenior aſſiſtant in his place; that the perſon ſo appointed ſhall go out at the time, when his predeceſſor, had he continued in office, would have retired; and finally, that ſuch caſual elections ſhall not in the leaſt interfere with the right of the perſon then appointed to be twice elected in the ordinary courſe; or in place of bringing in the ſenior aſſiſtant, on ſuch a vacancy, it ſhould be in the option of the Managers to re-elect one of thoſe ſurgeons who may have already ſerved for one or even two periods, and thus to retain, for ſome time longer, any man whoſe activity and abilities may deſerve ſuch a compliment.

The two ſurgeons in attendance may divide the buſineſs of the houſe

houſe betwixt them, in the manner now followed by the phyſicians, but this, and many regulations of ſubordinate arrangement, may be left to the judgement of the attending ſurgeons.

I do not think it one of the leaſt advantages of this plan, that it provides ſix gentlemen, who will often frequent the Hoſpital, and will naturally take care of its intereſts, and ſee that its regulations be enforced. It ſhould indeed be their duty to meet together, at certain ſtated times, to conſider the management of the wards under their care, and to repreſent to the Managers whatever they may think conducive to the welfare of the patients *.

It has been propoſed to fix a ſalary in future on the ſurgeons of the Hoſpital, though it is admitted that the funds of the Hoſpital cannot afford this expenditure. There is indeed one way in which a remuneration might be beſtowed without any deduction from the funds. I am perſuaded, that when the new arrangement takes place, the ſurgeons will beſtow infinitely greater pains, than they do at preſent, in teaching the dreſſers the ſkilful performance of their duty. There will, conſequently, ariſe a much greater competition, than now exiſts, for this office; and though the ſtudents do not ſeem now willing to incur any expence in obtaining it, yet the increaſed benefit they will then receive, will readily induce many of them, to give a handſome fee for the appointment. This fee, as

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* In the abſence of one of the attending ſurgeons, another *Attending* ſurgeon, and not the *Aſſiſtant*, ſhould perform his duty. Theſe two claſſes ſhould, I am of opinion, be kept perfectly diſtinct; for, if a diſcretionary power be committed to the chief ſurgeons, to devolve their duty upon an aſſiſtant, there is no end of the abuſes which may follow. Whereas, if they are confined in their choice of occaſional ſubſtitutes to thoſe of equal rank with themſelves, they will not incline to apply for their aid, except in caſes of neceſſity. It is the part of Mr Thomſon's plan that reſpects this ſubject, to which I chiefly object, although I perfectly agree with his general principles, and think highly of particular parts of his ſpecific propoſals.

in London, may be given to the ſurgeons in attendance, as a compenſation for their trouble. A reciprocal obligation will thus be created, on the ſurgeons to beſtow ſufficient pains in inſtructing the dreſſers, and on theſe to receive their inſtructions with attention.

III. OF THE ASSISTANT SURGEONS.

I PROPOSE, that, from among thoſe who ſhall have been not leſs than four years Members of the College of Surgeons, three aſſiſtant ſurgeons be elected, who ſhall attend the Infirmary, one by one, in regular ſucceſſion, for the ſpace of three months; and who ſhall continue in office till they are regularly promoted, in the manner above ſpecified, to the office of attending ſurgeons. Every vacancy thus occurring among the aſſiſtants ſhall be ſupplied by a new election.

Their province ſhall be to aſſiſt at operations, to perform diſſections, and to arrange the buſineſs of the waiting-room, under the direction of the attending ſurgeon. Frequent diſſection is the beſt ſchool at which an operator can be formed: the utility of devolving this trouble upon the aſſiſtant ſurgeon, muſt therefore be obvious.

It is matter of ſerious regret, under the preſent ſyſtem, that ſcarcely any time is allotted for giving advice to the numerous applicants who reſort occaſionally to the Hoſpital, and who either do not wiſh for admiſſion, or whoſe complaints are of ſuch a nature, as to preclude their reception into the houſe. When we conſider the fatal conſequence that may ariſe from the neglect of complaints at firſt trivial, and the great benefit which the perſons afflicted may derive, by being put upon a proper method of managing their diſorders, it will unqueſtionably be admitted, that this ought

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to be an *eſſential* part of the buſineſs of the houſe, and that the ſuperficial manner in which it is at preſent conducted, is an evil which calls for an effectual remedy.

I propoſe, for this purpoſe, that the acting aſſiſtant ſurgeon ſhall examine minutely all ſuch caſes, while the attending ſurgeons are viſiting the regular patients, and that the aſſiſtant ſhall afterwards concert with them the directions which ought to be given. I am alſo decidedly of opinion, that theſe directions ſhall henceforward be given, not verbally, but as diſtinctly as poſſible *in writing*. Were ſome ſuch plan eſtabliſhed, many of thoſe, who by the little ſatisfaction they now obtain, are prevented from applying for advice, might be encouraged to ſeek, and might happily find relief, from complaints, which, if neglected, may lay the foundation of the worſt diſeaſes.

I have now detailed the plan I have to offer at ſufficient length. Should it, or any ſimilar plan, be adopted, no ſurgeon will have the charge of the Hoſpital till he is ſufficiently qualified for the taſk; and every active ſurgeon will be retained as long as other avocations leave him leiſure or inclination to do his duty. At the ſame time, in the courſe of years, a great proportion of the Members of the College, will be elected to this charge.

In the event of the adoption of this plan, every young practitioner of abilities, and eager to attain eminence in his profeſſion, may much ſooner be brought forward into a ſituation in which he may make himſelf diſtinguiſhed, than by any mode of rotation including all the Members of the College.

From theſe obſervations, I think it will clearly appear to every man of candour, that the Members of the College of Surgeons, by acquieſcing

acquieſcing in this, or a ſimilar plan, will, inſtead of giving up what they may deem their lawful privileges, eſtabliſh them on a more ſolid and permanent baſis, while they will have the ſatisfaction of conferring on the Hoſpital the moſt eſſential benefits.

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